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**PARSONS HSUE & DE RUNTZ LLP**

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March 5, 2004

Commissioner For Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Re: Applicant(s): Auclair et al.  
Title: Soft Errors Handling in EEprom Devices  
Application No.: 09/437,078 Filing Date: November 9, 1999  
Examiner: Moise, Emmanuel Lionel Group Art Unit: 2133  
Docket No.: SNDK.026US5 Conf. No.: 7501

Dear Sir:

Transmitted herewith are the following documents in the above-identified application:

- (1) Return Receipt Postcard;
- (2) This Transmittal Letter (in duplicate); and
- (3) Response to Office Action (7 pages).



No additional fee is required.



The fee has been calculated as shown below:

**RECEIVED**

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Technology Center 2100

**CLAIMS AS AMENDED**

|  | <u>Claims Remaining<br/>After Amendment</u>  |       | <u>Highest No.<br/>Previously<br/>Paid For</u> |   | <u>Present<br/>Extra</u> | <u>Rate</u> | <u>Additional<br/>Fee</u> |             |
|--|--|-------|--|---|--------------------------|-------------|---------------------------|-------------|
| Total Claims   | 13   | Minus | 20   | = | 0                        | x \$18.00   | \$                        | 0.00        |
| Independent<br>Claims                                  | 4  | Minus | 4  | = | 0                        | x \$84.00   | \$                        | 0.00        |
| <input type="checkbox"/>                               | Fee of _____ for the first filing of one or more multiple<br>dependent claims per application  |       |  |   |                          |             | \$                        |             |
| <input type="checkbox"/>                               | Fee for Petition for Extension of Time   |       |  |   |                          |             | \$                        | 0.00        |
| <input type="checkbox"/>                               | Fee for Request for Continued Examination  |       |  |   |                          |             |                           | 0.00        |
| <b><u>Total additional fee for this Amendment:</u></b> |  |       |  |   |                          |             | \$                        | <u>0.00</u> |
| <input checked="" type="checkbox"/>                    | Conditional Petition for Extension of Time: If an extension of time is required for timely<br>filing of the enclosed document(s) after all papers filed with this transmittal have been<br>considered, an extension of time is hereby requested. |       |  |   |                          |             |                           |             |
| <input checked="" type="checkbox"/>                    | Please charge any additional fees required and credit any overpayment to our Deposit<br>Account No. 502664.  |       |  |   |                          |             |                           |             |
| <b>Total:</b>  |  |       |  |   |                          |             | \$                        | 0.00        |

Respectfully submitted,

Gerald P. Parsons  
Reg. No. 24,486

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